5
AVAILAB
) OPV

	JG 18 ZAMB	PART B -	FEE(S) TRA	NSMITTAL		
Complete and send	this form, together w		or Fax	P.O. Box 1450 Alexandria, Vir (571)-273-2885	ginia 22313-1450	
INSTRUCTIONS: This fo appropriate, All further co- indicated unless corrected	rm should be used for trat rrespondence including the below or directed otherwise	smitting the ISSUE Patent, advance orde in Block I, by (a)	FBB and PUBLI ars and notification specifying a new	CATION FBB (if reg of maintenance fees correspondence addres	uired). Blocks 1 through 5 will be mailed to the curren s; and/or (b) indicating a seg	should be completed what correspondence address parate "FEE ADDRESS"
maintenance tee nouticaudi	ng, CE ADDRESS (Note: Use Block I for				f mailing can only be used this certificate cannot be used all paper, such as an assignment of mailing or transmission.	
BERKELEY LA 1700NW 167TH P SUITE 240		Y GROUP		I hereby certify that t States Postal Service addressed to the Ma	rtificate of Mailing or Tran his Fee(s) Transmittal is beir with sufficient postage for fi il Stop ISSUB FEB address PTO (571) 273-2885,, on the	smission ng deposited with the Unit rst class mail in an envelo s above, or being facsim
BEAVERTON, OI 1/2006 RMEBRAH1 0000	R 97006 0070 503130     106292	57		MICHEUE	4 TURNER	(Depositor's nam
				more		(Signatu
C:2501 700.00	DA			Hugust	18/1200/0	(Da
APPLICATION NO.	FILING DATE	FII	RST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN, TYPE	SMALL ENTITY	ISSUB FEE	ı I b	UBLICATION FBB	TOTAL FRE(S) DUB	DATE DUB
	YES	\$700		\$0	\$700	08/23/2006
nonprovisional				LASS-SUBCLASS	٦ • • • • • • • • • • • • • • • • • • •	
	AINBR	ART UNIT		451-279000	J	•
· · · · · · · · · · · · · · · · · · ·	MOTHY V e address or indication of "F	3724	2 For printing on	the patent front page,	ist	lay Law and
CFR 1,363),  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Foo Address" indication (or "Fee Address" Indication form PTO/SB/47; Roy 03-02 or more recent) attached. Use of a Customer Number is required.		Correspondence	or agents OR, alto	single firm (having as	a member a 2 TC	Chinavary Erroug
Pro Address" indica Pro/SB/47; Rev 03-02	tion (or "Fee Address" Indic	ation form e of a Customer	registered attorne 2 registered paten listed, no name w	y or agent) and the name at attorneys or agents. I	nes of up to f no name is 3	
"Foo Address" indica PTO/SB/47; Rov 03-02 Number is required.  B. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E s an assignce is identified b n 37 CFR 3.11. Completion (RE)	E PRINTED ON THe low, no assignee da of this form is NOT	registered attorne 2 registered pater listed, no name w IB PATENT (print ta will appear on a substitute for filli B) RESIDENCE: (	y or agent) and the nan i attorneys or agents. I iil be printed. or type) the patent. If an assign ag an assignment. CITY and STATE OR	nee is identified below, the COUNTRY)	document has been filed
"Foo Address" indica PTO/SB/47; Rov 03-02 Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth it (A) NAME OF ASSIGN	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E s an assignce is identified b in 37 CFR 3.11. Completion (EE)	DE PRINTED ON THE clow, no assignee da of this form is NOT and the form is not be printed by the contract of t	registered attorne 2 registered pater listed, no name w IB PATENT (print at a will appear on a substitute for filin B) RESIDENCE: (	y or agent) and the nan it attorneys or agents. I ill be printed.  or type) the patent. If an assign an assignment.  CITY and STATE OR	nes of up to f no name is 3nee is identified below, the	document has been filed
Pro Address" indicated PTO/SB/47; Roy 03-02 Number is required.  ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNUTION O	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E is an assignee is identified b in 37 CFR 3.11. Completion IEEE e assignee category or catego e enclosed:	DE PRINTED ON THe clow, no assignee da of this form is NOT a correct (will not be printed by the close (will	registered attorne 2 registered paten listed, no name w IE PATENT (print ata will appear on a substitute for fill B) RESIDENCE: ( ted on the patent): Payment of Fee(s): A check in the a Payment by cree	y or agent) and the nan tattorneys or agents. I ill be printed.  or type) the patent. If an assignment.  CITY and STATE OR  Individual ()  mount of the fee(s) is e lit card, Form PTO-203	nee is identified below, the COUNTRY)  Corporation or other private genelosed.  8 is attached.	document has been filed
Proo Address" indication PTO/SB/47; Rov 03-02 Number is required.  B. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN  Please check the appropriate The following fee(s) are I saue Fee Publication Fee (No and Advance Order - # of the property of the	tion (or "Fee Address" Indic or more recent) attached. Us  D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion HEE  e assignee category or category enclosed: small entity discount permitt f Copies	DE PRINTED ON THe clow, no assignee da of this form is NOT a correct (will not be printed)	registered attorne 2 registered paten listed, no name w IE PATENT (print at will appear on a substitute for filt B) RESIDENCE: ( ted on the patent):  Payment of Fee(s): A check in the a Payment by crec The Director is I Deposit Account	y or agent) and the nat attorneys or agents. I ill be printed.  or type) the patent. If an assigng an assignment.  CITY and STATE OR  Individual ()  mount of the fee(s) is edit card, Form PTO-203 sereby authorized by chi Number 51-313.	nee is identified below, the COUNTRY)  Corporation or other private genelosed.  8 is attached.  arge the required fee(s), or or Q	document has been filed roup entity Government, to tra copy of this form).
Proo Address" indicate PTO/SB/47; Rov 03-02 Number is required.  B. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN  Please check the appropriate as the following fee(s) are publication Foe (Note Advance Order - # of Change in Entity Status as Applicant claims S	tion (or "Fee Address" Indicor more recent) attached. Us  D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion HEE  e assignee category or category enclosed: small entity discount permitt of Copies  (from status indicated above MALL ENTITY status. Soo	DE PRINTED ON THelow, no assignee da of this form is NOT and the printer of the p	registered attorne 2 registered paten listed, no name w IE PATENT (print ata will appear on a substitute for fills B) RESIDENCE: (  ted on the patent):  Payment of Fee(s):  A check in the a Payment by crec The Director is f Deposit Account  b. Applicant is n	y or agent) and the nan at attorneys or agents. I ill be printed.  or type) the patent. If an assignment.  CITY and STATE OR  Individual   mount of the fee(s) is edit card. Form PTO-203 tereby authorized by the Number 51-313.	nee is identified below, the COUNTRY)  Corporation or other private genelosed.  8 is attached.	document has been filed roup entity Government, to tra copy of this form).
Proo Address" indicate PTO/SB/47; Rov 03-02 Number is required.  B. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN  Please check the appropriate as the following fee(s) are publication Foe (Note Advance Order - # of Change in Entity Status as Applicant claims S	tion (or "Fee Address" Indicor more recent) attached. Us  D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion HEE  e assignee category or category enclosed: small entity discount permitt of Copies  (from status indicated above MALL ENTITY status. Soo	DE PRINTED ON THelow, no assignee da of this form is NOT and the printer of the p	registered attorne 2 registered paten listed, no name w IE PATENT (print ata will appear on a substitute for fills B) RESIDENCE: (  ted on the patent):  Payment of Fee(s):  A check in the a Payment by crec The Director is f Deposit Account  b. Applicant is n	y or agent) and the nan at attorneys or agents. I ill be printed.  or type) the patent. If an assignment.  CITY and STATE OR  Individual   mount of the fee(s) is edit card. Form PTO-203 tereby authorized by the Number 51-313.	nee is identified below, the COUNTRY)  Corporation or other private grant gran	document has been filed roup entity Government, to tra copy of this form).
Proo Address" indicated PTO/SB/47; Rov 03-02 Number is required.  A ASSIGNEE NAME AND PLEASE NOTE: Unloss recordation as set forth in (A) NAME OF ASSIGN  Please check the appropriate as the following fee(s) are publication Foe (Note Advance Order - # of the USPTO NOTE: The Issue Fee and I as Applicant claims Status as Applicant claims as	tion (or "Fee Address" Indicor more recent) attached. Us  D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion HEE  e assignee category or category enclosed: small entity discount permitt of Copies  (from status indicated above MALL ENTITY status. Soo	DE PRINTED ON THelow, no assignee da of this form is NOT and the printer of the p	registered attorne 2 registered pater listed, no name w IE PATENT (print that will appear on a substitute for filli B) RESIDENCE: ( ted on the patent):  Payment of Fee(s):  A check in the a  Payment by crec The Director is f Deposit Account  b. Applicant is n on Fee (if any) or te from anyone other office.	y or agent) and the nan attorneys or agents. I altorneys or agents. I ill be printed.  or type) the patent. If an assignment.  CITY and STATE OR  Individual (1)  mount of the fee(s) is educated. Form PTO-203 tereby authorized by che in Number (2) (2) (3) (4) (5) (6) (6) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	nee is identified below, the COUNTRY)  Corporation or other private grandlessed.  8 is attached.  arge the required fee(s), or or conclusion or conclusion and conclusion are conclusive and conclusion and conclusion are conclusive attached.  LL HNTITY status. See 37 (ch) pald issue fee to the application or agent; or conclusion attached attorney or agent; or conclusion and conclusion are conclusive attached.	document has been filed roup entity Government, to tra copy of this form).

Please find attached for filing in connection with application no. 10/629,257, entitled ROTARY BLADE SHARPENER, the following documents:

Part B - Fee(s) Transmittal (1 page)

Thank you,

Michelle Turner for Michael J. Willardson





## Berkeley Law 6 Technology Group<sub>LLC</sub>

1700 NW 187<sup>th</sup> Place, Suite 240 Beaverton, OR 97006 Phone: 503.439.6500 Fax: 503.439.6558

## **Fax**

То:	Mail Stop Issue Fee	From:	Michael J. Willardson	
Fax:	571-273-2885	Pages:	2	
Phone:		Date:	August 18, 2006	
Our Ref	: 034.P001	CC;		
□ Urger	at □For Review	☐ Please Comment	☐ Please Reply	□ Please Recycle
Please	find attached for f	filing in connection with	application no.	10/629,257, entitled

Part B – Fee(s) Transmittal (1 page)

ROTARY BLADE SHARPENER, the following documents:

## CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to U.S. Patent and Trademark Office on:	o th
August 18, 2006	
Date of Transmission	
Michelle Turner	
Name of Person Transmitting Correspondence	
Mr. least to	
Signature	